



FILE COPY Receipt #2

Dkt. 1166/58111

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Application of: John P. FALLON, et al.

Serial No. : 09/449,002

Group Art Unit: 3737

Date Filed : November 24, 1999

Examiner:

For : DICOM COMPLAINT FILE COMMUNICATION
INCLUDING QUANTITATIVE AND IMAGE DATA

1185 Avenue of the Americas
New York, N.Y. 10036

Assistant Commissioner for Patents
Processing Division's Customer Correction Branch
Washington, D.C. 20231

REQUEST FOR CORRECTED FILING RECEIPT

Sir:

It is respectfully requested that the official Filing Receipt be amended to reflect the correct spelling of the title i.e., from "DICOM COMPLIANT FILE COMMUNICATION INCLUDING QUANTATIVE AND IMAGE DATA" to --DICOM COMPLIANT FILE COMMUNICATION INCLUDING QUANTITATIVE AND IMAGE DATA--.

The Office is hereby authorized to charge any fees which may be required in connection with this request to our Deposit Account No. 03-3125.

Respectfully submitted,

Richard F. Jaworski, Reg. No. 33,515
Attorney for Applicant
Cooper & Dunham LLP
Tel.: (212) 278-0400

I hereby certify that this paper is being deposited this date with the U.S. Postal Service as first class mail addressed to the Assistant Commissioner for Patents, Washington, D.C. 20231.

Richard F. Jaworski
Reg. No. 33,515

January 24, 2000
Date

RECEIVED
MAY 11 2000
TC 3700 MAIL ROOM

BEST AVAILABLE COPY

FILING RECEIPT

UNITED STATES DEPARTMENT OF COMMERCE
Patent and Trademark Office
ASSISTANT SECRETARY AND COMMISSIONER
OF PATENTS AND TRADEMARKS
Washington, D.C. 20231

REF

APPLICATION NUMBER	FILING DATE	GRP ART UNIT	FIL FEE REC'D	ATTORNEY DOCKET NO.	DRWGS	TOT CL	IND CL
09/449,002	11/24/99	3737	\$886.00	1166/58111	12	27	3

IVAN S KAVRUKOV
1185 AVENUE OF THE AMERICAS
NEW YORK NY 10036

Receipt is acknowledged of this nonprovisional Patent Application. It will be considered in its order and you will be notified as to the results of the examination. Be sure to provide the U.S. APPLICATION NUMBER, FILING DATE, NAME OF APPLICANT, and TITLE OF INVENTION when inquiring about this application. Fees transmitted by check or draft are subject to collection. Please verify the accuracy of the data presented on this receipt. If an error is noted on this Filing Receipt, please write to the Office of Initial Patent Examination's Customer Service Center. Please provide a copy of this Filing Receipt with the changes noted thereon. If you received a "Notice to File Missing Parts of Application" ("Missing Parts Notice") in this application, please submit any corrections to this Filing Receipt with your reply to the "Missing Parts Notice." When the PTO processes the reply to the "Missing Parts Notice," the PTO will generate another Filing Receipt incorporating the requested corrections (if appropriate).

Applicant(s) JOHN P. FALLON, ANDOVER, MA; HOWARD P. WEISS, NEWTON,
MA; DAVID MISLAN, LEXINGTON, MA.CONTINUING DATA AS CLAIMED BY APPLICANT-
PROVISIONAL APPLICATION NO. 60/110,210 11/30/98

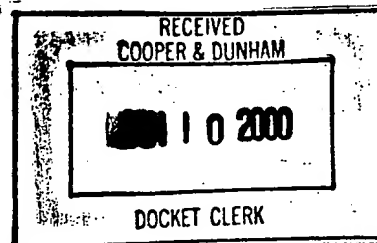
IF REQUIRED, FOREIGN FILING LICENSE GRANTED 01/04/00

TITLE

DICOM COMPLIANT FILE COMMUNICATION INCLUDING QUANTITATIVE AND IMAGE
DATA

Quantitative

PRELIMINARY CLASS: 600



SHB

BEST AVAILABLE COPY

DATA ENTRY BY: ARMSTEAD, LORRAINE TEAM: 06 DATE: 01/04/00

(See reverse for new important information)

FILE COPY

SERIAL NUMBER 09/449,002	FILING DATE 11/24/99	CLASS 600	GROUP ART UNIT 3737	ATTORNEY DOCKET NO. 1166/58111
-----------------------------	-------------------------	--------------	------------------------	-----------------------------------

APPLICANT	JOHN P. FALLON, ANDOVER, MA; HOWARD P. WEISS, NEWTON, MA; DAVID MISLAN, LEXINGTON, MA.
	<p>**CONTINUING DOMESTIC DATA*****</p> <p>VERIFIED PROVISIONAL APPLICATION NO. 60/110,210 11/30/98</p> <p><u>BSC</u></p>
	<p>**371 (NAT'L STAGE) DATA*****</p> <p>VERIFIED</p> <p><u>BSC</u></p>
	<p>**FOREIGN APPLICATIONS*****</p> <p>VERIFIED</p> <p><u>BSC</u></p>

IF REQUIRED, FOREIGN FILING LICENSE GRANTED 01/04/00

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY MA	SHEETS DRAWING 12	TOTAL CLAIMS 27	INDEPENDENT CLAIMS 3
---	---	------------------------	----------------------	--------------------	-------------------------

Verified and Acknowledged BSC Examiner's Initials _____ Initials _____

ADDRESS	IVAN S KAVRUKOV 1185 AVENUE OF THE AMERICAS NEW YORK NY 10036

TITLE	DICOM COMPLIANT FILE COMMUNICATION INCLUDING QUANTITATIVE AND IMAGE DATA

FILING FEE RECEIVED \$886	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT NO. _____ for the following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
----------------------------------	---	---